

# STATE OF MONTANA

## STATEMENT OF RESIGNATION OF AGENT

**MAIL:** **BRAD JOHNSON**  
Secretary of State  
P.O. Box 202801  
Helena, MT 59620-2801

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This is the minimum information required  
(This space for use by the Secretary of State only)

No Fee

- ☐ 24 Hour Priority Filing Add \$ 20.00  
☐ 1 Hour Expedite Filing Add \$100.00

For the purpose of resigning as registered agent with the Montana Secretary of State's Office, the undersigned submits the following statements of fact to the Secretary of State in accordance with 35-7-111, MCA:

**1. The exact name of the entity:**

\_\_\_\_\_

**Resignation of Appointed Registered Agent Information**

**2. The name of current registered agent:** \_\_\_\_\_

**3. The person representing the entity where agent will send notification of their resignation:**

**Person's Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
\_\_\_\_\_

- 4. The registered agent resigns from serving as agent for service of process for the above listed entity.**
- 5. A statement of resignation takes effect on the earlier of the 31<sup>st</sup> day after the day on which it is filed or the appointment of a new registered agent for the represented entity.**
- 6. When a statement of resignation takes effect, the registered agent ceases to have responsibility for any matter tendered to it as agent for the represented entity.**
- 7. By my signature, I, resign as registered agent for the above named entity and do state that the statements contained therein are true, under penalty of false swearing.**

\_\_\_\_\_  
Signature of Registered Agent

\_\_\_\_\_  
Dated (Mo/Day/Yr)

\_\_\_\_\_  
Printed Name and Title of above Authorized Person